

PUBLIC NOTICE

Pursuant to 42 C.F.R. § 447.205, the Georgia Department of Community Health is required to give public notice of any significant proposed change in its methods and standards for setting payment rates for services.

MENTAL RETARDATION WAIVER PROGRAM (MRWP)

COMMUNITY HABILITATION AND SUPPORT SERVICES (CHSS)

Effective for dates of service on and after September 8, 2005, the Department is proposing to changes rates in the Mental Retardation Waiver Program (MRWP) and the Community Habilitation and Support Services (CHSS) Waiver Program as presented in the attached table.

The purpose of these changes is to compensate MRWP and CHSS providers for additional costs incurred in providing waiver services. An additional \$19,479,200 in total funds and \$7,498,321 in state funds is appropriated for these changes in state fiscal year 2006.

The public notice is available for review at each county Department of Family and Children Services office. Citizens wishing to comment in writing on the proposed changes should do so before October 13, 2005 to the Board of Community Health, P. O. Box 38406, Atlanta, Georgia 30334.

Comments so submitted will be available for review by the public at the Department of Community Health, Monday – Friday, 9:00 a.m. to 4:30 p.m., in Room 4074, 2 Peachtree Street, N.W., Atlanta, Georgia 30303.

An opportunity for public comment will be held on October 13, 2005 at 12:00 p.m. in conjunction with the October meeting of the Board of Community Health. Individuals who are disabled and need assistance to participate during this meeting should call (404) 656-4479. The Board will vote on the proposed changes after comments have been received. The October Board meeting will be held in the Floyd Room of the Twin Towers Building, 20th Floor, West Tower, 200 Piedmont Avenue, Atlanta, Georgia.

NOTICE IS HEREBY GIVEN THIS 8th DAY OF September 2005.

Tim Burgess, Commissioner

FY'06 MRWP & CHSS Rates

MRWP				
Service	Unit	# Units	Rate	Annual
Residential Training & Supervision	Day	324	\$ 155.56	\$ 50,401.44
Personal Support (capped rate)	Day	365	\$ 138.09	\$ 50,402.85
Day Habilitation	15 minutes	5760	\$ 3.04	\$ 17,510.40
Day Support (Monthly Maximum Billing)	Month	12	\$ 870.83	\$ 10,449.96
Day Support T2025U1	Hour	720	\$ 7.25	\$ 5,220.00
Day Support T2250 U2	Hour	360	\$ 7.25	\$ 2,610.00
Day Support T2520 U3	Hour	480	\$ 7.25	\$ 3,480.00
Natural Support Enhancement	Individual	200	\$ 62.21	\$ 12,442.00
Natural Support Therapies	15 minutes	Individual	\$ 36.56	
Natural Support Enhancement (self directed)	Individual	200	\$ 62.21	\$ 12,442.00
Supported Employment	15 minutes	3840	\$ 1.80	\$ 6,912.00
Respite S5150	15 minutes	1248	\$ 1.54	\$ 1,921.92
Respite S5150 TF	15 minutes	1248	\$ 1.54	\$ 1,921.92
Respite S5150 TG	15 minutes	1248	\$ 2.35	\$ 2,932.80
Respite S5150 U2	15 minutes	1248	\$ 2.35	\$ 2,932.80
Environmental Modification	Lifetime		\$ 10,400.00	
Vehicle Adaptation	Lifetime		\$ 3,120.00	
Specialized Medical Equipment	Lifetime		\$ 13,474.76	
Specialized Medical Supplies	Month	12	\$ 144.54	\$ 1,734.48

CHSS				
Service	Unit	# Units	Rate	Annual
CHSS (Institution)	Day	324	\$ 208.03	\$ 67,401.72
CHSS (Community)	Day	324	\$ 118.03	\$ 38,241.72
Environmental Modifications	Year	1	\$ 6,273.28	\$ 6,273.28
Specialized Medical Equipment	Year	1	\$ 5,200.00	\$ 5,200.00
Specialized Medical Supplies	Month	12	\$ 155.68	\$ 1,868.16